

Index of Claims



Application No.

09/918,158

Examiner

Christopher A. Fiorilla

Applicant(s)

DICHIARA, ROBERT A.

Art Unit

1731

<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> (Through numeral) Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal
<input type="checkbox"/> = Allowed	<input type="checkbox"/> + Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
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4		54		104	
5		55		105	
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8		58		108	
9		59		109	
10		60		110	
11		61		111	
12		62		112	
13		63		113	
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17		67		117	
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